

CLAIMS ONLY							Application Number 10/645193	Filing Date			
							Applicant(s)				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments				
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend
1	/						51				
2		/					52				
3		/					53				
4		/					54				
5							55				
6		/					56				
7		/					57				
8		/					58				
9		/					59				
10		/					60				
11		/					61				
12		/					62				
13		/					63				
14		/					64				
15		/					65				
16		/					66				
17		/					67				
18		/					68				
19	/		/				69				
20	/		/				70				
21	/		/				71				
22	/		/				72				
23	/		/				73				
24	/		/				74				
25	/		/				75				
26	/		/				76				
27	/		/				77				
28	/		/				78				
29	/		/				79				
30	/		/				80				
31	/		/				81				
32	/		/				82				
33	/		/				83				
34	/		/				84				
35	/		/				85				
36	/		/				86				
37	/		/				87				
38	/		/				88				
39	/		/				89				
40	/		/				90				
41	/		/				91				
42	/		/				92				
43	/		/				93				
44	/		/				94				
45	/		/				95				
46	/		/				96				
47	/		/				97				
48							98				
49							99				
50							100				
Total Indep			3				Total Indep				
Total Depend			13				Total Depend				
Total Claims			16				Total Claims				